

MORNING AUDIT REPORT

Market Manager Name: _____

Date: _____

Van Number: _____ Time of Call: _____

Retailer Name and Address: _____

Phone Number: _____

Contact Name: _____

Is the van on site? _____

What time did the van arrive? _____

Did the van team explain the promotion? _____

Are the van and the kiosk in the proper location? _____

When did you place Advance POS? _____

Did you receive an additional shipment of Marlboro? _____

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